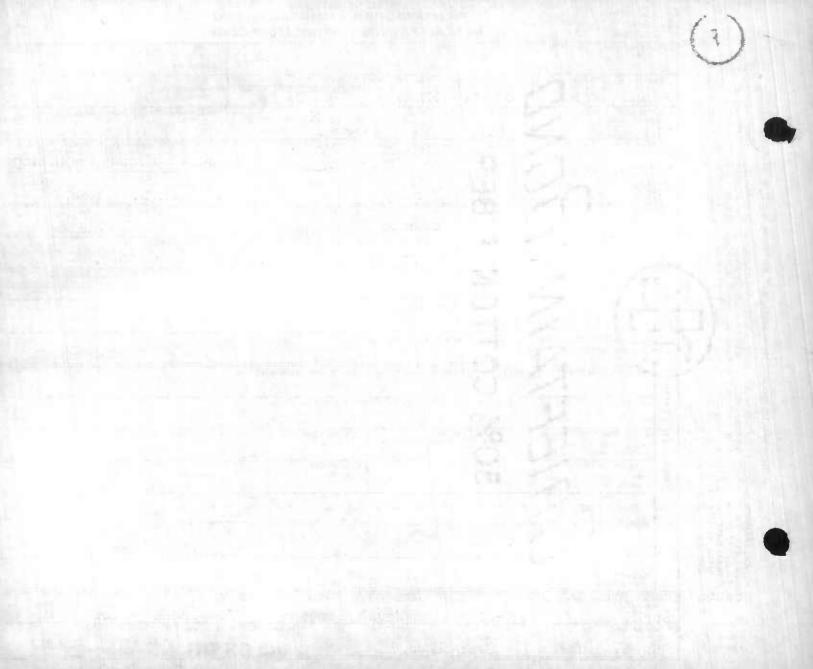
STATE OF MARYLAND

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FOR STATE				DEPARTMENT OF HEA	LTH AND MENTAL	HYGIENE	U	0	14 14
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(1112 9111111		Doroth	У	Jean F	Robinson	DEATH MA	TED 🗆	2/28/198	85
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D. CITY OR I	OWN OF DEA	(# NOT IN SUCH FA		SPITAL, NURSING HOME, OR (ACILITY, GIVE STREET ADDRESS)		FOR MOST OF WORKING LIFE)		OF INDUSTRY Publishing	
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	ATHER'S NAME DeWitt		MIDDLE	LAST	IS MOTHER'S MAID	DEN NAME MIDDLE		LAST	
		INITIE ADM	ED CODOCCO	Everett 166 SOCIAL SECURITY NO.	Hilda 17. INFORMANT	A:	DDRESS	Kusba	art
(YES, NO, OR UNKNOWN)		(IF YES, GIVE WAR OR DATES)				Wright P. Robinson B			
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FOR

REGISTRAR

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(VRA 15, 4)

12b. KIND OF BUSINESS OR TYPE OF WORK FOR MOST OF WORKING LIFE! INDUSTRY Home 13e.STREET ADDRESS / ZIP CODE R.D. 2. Box 2041 21617 Leas ADDRESS R.D. 2, Box 20A1 Mrs. Nancy R. Jones, Centreville, Md. 2161' APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH PART 2 OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO THE TERMINAL DISEASE OR CONDITION GIVEN IN PART 110 206. IF YES, WERE FINDINGS USED IN CERTIFYING CAUSES OF DEATH? 21c. HOW INJURY OCCURRED (ENTER NATURE OF INJURY IN ITEM 18 PART 1 OR PART 2) COUNTY and that in (my) (our) opinion death occurred on the date and hour and from the causes stated 22c. DATE SIGNED PHYSICIAN DIRECTOR PHYSICIAN STATE Feb. 13. 1985 Cedar Hill Crematory Suitland. Prince George's 24 FUNERAL DIRECTOR DHMH - 16 50M 4/83 James H. Barton, Jr., Centreville, Md. 21617

STATE OF MARYLAND

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

CERTIFICATE OF DEATH

REG. NO

26 HOUR

IF UNDER 24 HRS

1985

IF UNDER I YEAR

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